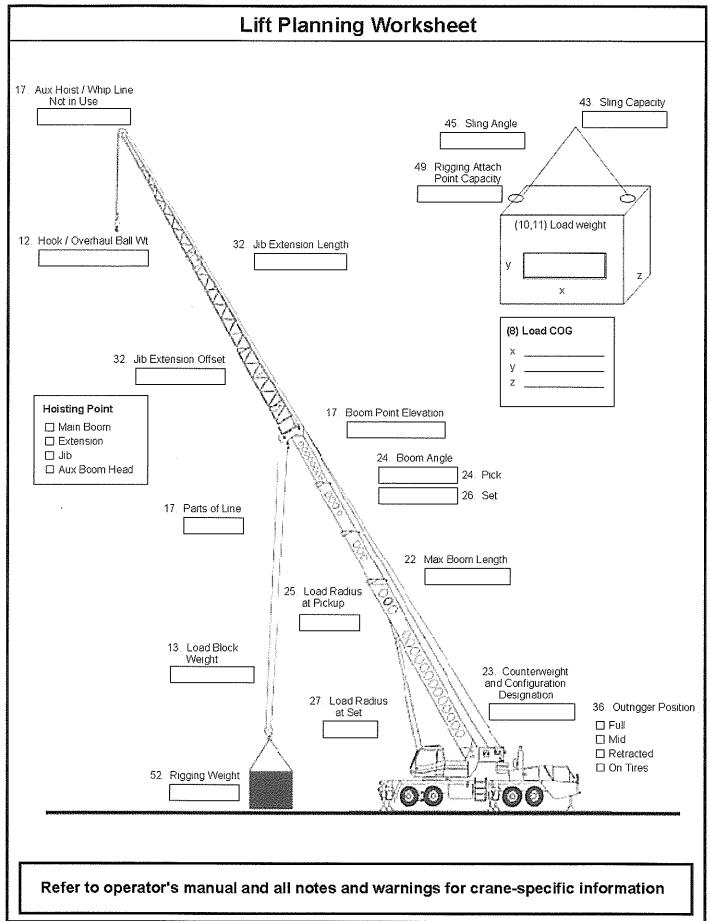
Attachment 3

## Kennedy Space Center Lift Plan for Construction Contractors

This document is for use by construction contractors performing work for Kennedy Space Center. It is recommended for all lifts and will satisfy the lift planning requirements in accordance with OSHA and NASA regulations and contract requirements. A lift plan is <u>mandatory</u> when: 1) lifting personnel with a crane, 2) the load exceeds 75% of the crane's capacity in a given configuration, 3) the lift requires more than one crane, 4) during demolition when the actual weight or structural integrity of the load are in doubt, 5) when the operation is within a boom length of power lines, 6) when lifting over active work areas, occupied buildings, or public roadways, or 7) lifts of submerged or partially submerged objects. For further assistance, please contact the KSC Institutional Safety Office at 867-SAFE.

1. Company Name		Name and Signature of Person Preparing this Lift Plan	2. Date	
3. Project Name and Job Location			A-11-7/1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
4. Load Description		· · · · · · · · · · · · · · · · · · ·		
5. Crane Description - Type, Manufacturer, Model # (multi	iple crane lifts re	quire separate plan for each crane)	***************************************	
6. Lift Description (aftach diagram of lift and load placeme	nt)	* V***********************************		
LOAD		CRANE (continued)		
7. Load Condition (describe)		27. Radius at Set-down	ft	
8. Known Center of Gravity? (Atlach diagram)		28. Capacity at minimum boom angle / maximum radius (Attach copy of actual load chart used)	lbs	
Source of Load Weight (attach a copy of drawings, calculations, bill of lading, etc.)		29. Maximum load on crane for this lift (Gross Load from Block 20)	lbs	
10. Load Weight Empty	lbs	30. Percentage of the crane's rated capacity in this configuration	%	
11. Weight of Load Contents / Fluids	lbs	JIB/FLY	-	
12. Weight of Auxillary Block	lbs	31. Erected Stowed Store	d	
13. Weight of Main Block	Ibs	32.   If jib / fly is used: Length = Angle	<u></u>	
14. Weight of Lifting Beam (See Block 50)	lbs	33. Rated capacity of jib / fly from chart =		
15. Weight of Slings / Shackles / Other Rigging (See Blocks 42 thru 52)	Ibs	34. Weight of Jib if installed but not in use	lbs	
16. Deduction for Jib / Fly (if applicable) (See Block 34)	Ibs	CRANE SETUP/OTHER CONSIDERATIONS		
17. Weight of Hoist Rope (if applicable)	Ibs	35. Soil conditions / level / underground hazards / Crane mat required?		
18. Weight of Auxillary Head/Rope (if applicable)	ibs	36. Outriggers (full / partial) / pads / matting / on rubber?		
19. Additional Deductions (list if applicable)	lbs	37. Buildings, equipment, or structure to lift / swing over?		
20. Gross Load (Add Block 10 thru 19)	lbs	YesNo		
CRANE		39. Working quadrants / swing restrictions?		
21. Boom Configuration		40. High voltage / electrical hazards/other hazards?		
22. Boom Length	ft	41. Other Considerations? (Head room, winds, taglines, traffic, etc.) Add to Block 6		
23. Counterweight	lbs	RIGGING		
24. Boom angle at Pick-up	O	42. Slings (number, size, type)		
25. Radius at Pick-up	ft	43. Slings rated capacity per configuration (See Block 45)		
26. Boom angle at Set-down	0	44. Total Weight of slings	lbs	

48. Total Weight of Shackdes   bit   58. Spreader Bearn/Other rigging required? (Type, Szo, Capacity)   59. Operators certification (Annual/Daily Checkist)   59. Operators certification (Annual/Daily Checkist)   59. Operators certification (Annual/Daily Checkist)   59. Operators certification document(s)   51. Narrative of itip procedures (See atom 6)   51. Others   51. Others   52. Source of load weight (See Items 8 9. 0)   53. Others   52. Source of India weight (See Items 8 9. 0)   53. Others   52. Source of India weight (See Items 8 9. 0)   53. Others   52. Source of India weight (See Items 8 9. 0)   53. Others   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 8 9. 0)   54. Source of India weight (See Items 9 9. Source of India weight (See Ite	RIGGING (continued)		REQUIRED ATTACHMENTS	
Siling Certifyuration Angle  45. Shaddes (mither) size of standard to calculate crone operated capacity of shaddes and sha	45. Hitch (vertical, basket, choker)	•		
S5 Photocopy of actual load charts used to calculate crone capacity   S6 Photocopy of actual load charts used to calculate crone capacity   S6 Rigging certification   S7 Rigging deal limit charts (Safe Working Load Limit)   S8 Crone certification (Annual/Deity Checklist)   S8 Crone certification (Annual/Deity Checklist)   S9 Operators certification (Annual/Deity Checklist)   S9 Operators certification comment(s)   S9 Operators certification comment(s)   S9 Operators certification   S9 Operators (Annual/Deity Checklist)	Sling Configuration Angle		g place points	
47. Shackles reted capacity  48. Total Weight of Shackles  49. Spreader Beam/Other rigging required? (Type, Size, Capacity)  50. Weight of Spreader Beam/Other rigging required? (Type, Size, Capacity)  50. Weight of Spreader Beam/Other rigging required? (Type, Size, Capacity)  50. Weight of Spreader Beam/Other rigging (Add lines 44, 48, 50)  51. Cornection to Load capacity each [lugs, bollards, pad eyes, none)  52. Total Weight of all rigging (Add lines 44, 48, 50)  53. Others  54. I certify that all information contained herein has been reviewed for accuracy and correctness.  55. Submitting Official Signature  56. Shack of Size (Add Lines 44, 48, 50)  57. Total Weight of all rigging (Add lines 44, 48, 50)  58. Submitting Official Signature  59. Accept Accept Accept Michanges  60. None a Title  60. Shack of Size (Add Lines 44, 48, 50)  61. Narrative of lift procedures (See items 5 & 5)  62. Source of load weight (See items 5 & 5)  63. Others  63. Others  64. Name & Title  65. District (Add Lines 44, 48, 50)  66. Shack of Size (Add Lines 44, 48, 50)  67. Accept with Changes  67. None & Title  68. Accept Michanges  68. Non Accepted  69. Contracting Officer;  69. Accept Michanges  69. Non Accepted  69. Contracting Officer;  69. Approve  69. Disapprove  69. Instructions for Kennedy Space Center Lift Plan for Construction Contractors  69. Instructions for Kennedy Space Center Lift Plan for Construction Contractors  69. Instructions for Kennedy Space Center Lift Plan for Construction Contractors  69. Shack elexplenatory.  60. Share description of pictup and placement of load. Attach diagrams as necessary  70. Describe the load and any special considerations (e.g., dv., solid, filled with liquid, empty, stake, unstable, etc.).  80. Share description of pictup and placement of load. Attach diagrams as necessary  71. Describe the load and any special considerations (e.g., dv., solid, filled with liquid, empty, stake, unstable, etc.).  81. Describe the load and any special considerations (e.g., dv., solid, filled with liq	46. Shackles (number, size)			
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49. Spreader Beam/Other rigging required? (Type, Size, Capacity)  49. Spreader Beam/Other rigging required? (Type, Size, Capacity)  50. Weight of Spreader Beam/Other rigging required? (Type, Size, Capacity)  51. Connection to Load capacity each (luigit, bollards, pad eyes, none)  51. Connection to Load capacity each (luigit, bollards, pad eyes, none)  52. Total Weight of all rigging (Add lines 44, 48, 50 libe  1	41. Shackes rated capacity		56. Rigging certifications	
Speader Beam/Other rigging required? (Type, Size, Capacity)   59. Operators certification (Annual Lary Checkst)   59. Operators certification (Annual Lary Checkst)   59. Operators certification document(s)   50. Weight of Spreader Beam/Other rigging   50. Connection to Load capacity each (lugs, bollards, pad eyes, none)   67. Connection to Load capacity each (lugs, bollards, pad eyes, none)   67. Connection to Load capacity each (lugs, bollards, pad eyes, none)   67. Connection to Load capacity each (lugs, bollards, pad eyes, none)   67. Connection to Load capacity each (lugs, bollards, pad eyes, none)   67. Connection to Load capacity each (lugs, bollards, pad eyes, none)   67. Connection to Load capacity each (lugs, bollards, pad eyes, none)   67. Connection to Load capacity (See Itams 8 & 9)   67. Connection to Load capacity (See Ita	40. Tabal Mailabh of Chaoldea	1 1,16		
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Solution   Spreader Beamfother rigging   Solution   S	49. Spreader Beam/Other rigging required? (Type, S	ize, Capacity)	59. Operators certification	
51. Connection to Load capacity each (lugs, bollards, pad eyes, none) 52. Total Weight of all rigging (Add lines 44, 48, 50 and 51  I certify that all information contained herein has been reviewed for accuracy and correctness.  Submitting Official Signature  FOR NASA USE ONLY (please initial)  Institutional Safety: Accept Accept with Changes: Not Accepted  Lifting Device's Equipment Manager: Accept Accept with Changes: Not Accepted  Lifting Device's Equipment Manager: Accept Accept with Changes: Not Accepted  Contracting Officer: Approve Disapprove:  Instructions for Kennedy Space Center Lift Plan for Construction Contractors  1. Name of contractor performing the fitt, Include name of person preparing this lift plan.  2. Data lift plan was prepared.  3. Project name and actual location of lift.  4. Describe the load and any special considerations (s. Sall-explanator).  5. Sall-explanatory.  7. Describe the load and any special considerations (s. g., dry, solid filled with liquid, empty, stable, unstable, etc.).  8. Is the load's center of gravity known? I so where is it documented? Attach dagram. (On Lift Plan Worksheet)  9. Document the source of load weight (s. g., drawings, calculations, bill of lading, etc.).  1018. Self-explanatory. (On Lift Plan Worksheet)  11. 18. List all additional deductions and weight (s. g., drawings, calculations, bill of lading, etc.).  22. 10. Describe the load enders of the load of the		<u> </u>	60. Rigger qualification document(s)	
52. Total Weight of all rigging (Add lines 44, 48, 50 lbs  I certify that all information contained herein has been reviewed for accuracy and correctness.  Submitting Official Signature    FOR NASA USE ONLY (please initial)	50. Weight of Spreader Beam/other rigging	[lb		
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Institutional Safety: Accept: Accept with Changes: Not Accepted  Lifting Device's Equipment Manager: Accept: Accept with Changes: Not Accepted  Contracting Officer: Approve: Disapprove:  Instructions for Kennedy Space Center Lift Plan for Construction Contractors  1. Name of contractor performing the lift. Include name of person preparing this lift plan. 2. Date lift plan was prepared. 3. Project name and actual location of lift. 4. Describe the load and any special considerations. 5. Self-explanatory. 6. Brief description of pickup and placement of load. Attach diagrams as necessary. 7. Describe the load and any special considerations (e.g., dry, solid, filled with liquid, empty, stable, unstable, etc.). 8. Is the load's center of gravity known? If so where is it documented? Attach dagram. (On Lift Plan Worksheet) 9. Document the source of load weight (e.g., drawings, calculations, bill of lading, etc.). 10. 18. Self-explanatory. (On Lift Plan Worksheet) 19. List all additional deductions and weights 20. Add Block (10 through Block 19. (On Lift Plan Worksheet) 21. Describe boom configuration. Refer to manufacturer's terminology. 22. 27. Self explanatory. (On Lift Plan Worksheet) 23. Canne's rated capacity at minimum boom angle / maximum radius. Figure worst case between pick and place. 29. Carpy Gross Load from Block #20. 30. Block #20 divided by Block #20. 31. Check to indicate pib / file retend, stowed, or stored off the crane. 32. If it the Julis used, enter the length of the boom in feet and the angle in degrees. (On Lift Plan Worksheet) 33. List the ib capacity from the Fry from chart. 34. The weight of the jib if it is installed on the boom but is not being used during the lift. (On Lift Plan Worksheet) 35. Describe outloger sealured marking if application. (On Lift Plan Worksheet) 36. Describe outloger sealured marking if application. (On Lift Plan Worksheet) 37. Describe outloger sealured marking if application. (On Lift Plan Worksheet) 38. Describe outloger sealured on the book of the project of the c		contained herein h	as been reviewed for accuracy and correctness.	
Institutional Safety: Accept Accept with Changes. Not Accepted  Lifting Device's Equipment Manager: Accept Accept Accept with Changes: Not Accepted  Contracting Officer: Approve: Disapprove  Instructions for Kennedy Space Center Lift Plan for Construction Contractors  1. Name of contractor performing the lift. Include name of person preparing this lift plan. 2. Date lift plan was prepared. 3. Project name and actual location of lift. 4. Describe the load and any special considerations. 5. Self-explanatory. 6. Brief description of pictury and placement of load. Attach diagrams as necessary. 7. Describe the load and eany special considerations (e.g., dry, solid, filled with liquid, empty, stable, unstable, etc.). 8. Is the load's center of gravity known? If so where is it documented? Attach diagram. (On Lift Plan Worksheet) 9. Document the source of load weight (e.g., dry, solid, filled with liquid, empty, stable, unstable, etc.). 9. Self-explanatory. (Un Lift Plan Worksheet) 10. 18. Self-explanatory (Un Lift Plan Worksheet) 11. List all additional deductions and weights. 12. Describe born configuration. Refer to manufacturer's terminology. 12. 22. 27. Self explanatory (Un Lift Plan Worksheet) 12. Describe born configuration. Refer to manufacturer's terminology. 12. 28. Crane's rated capacity at minimum boom angle / maximum radius. Figure worst case between pick and place. 12. Crane's rated capacity at minimum boom angle / maximum radius. Figure worst case between pick and place. 13. Check to indicate jib / fly erected, stowed, or stored off the crane. 14. If the Jib is used, enter the length of the boom but is not being used during the lift. (On Lift Plan Worksheet) 13. List the Jib capacity from the Fly from chart. 14. The weight of the lip if it is installed on the boom the feat and the angle in degrees. (On Lift Plan Worksheet) 15. Describe on siderations for buildings, structures, or equipment which will be under the load during the lift. 16. Describe side, soil, stability conditions and any underground hexa	Submitting Official Signature		Name & Title Dat	е
Institutional Safety: Accept Accept with Changes: Not Accepted  Lifting Device's Equipment Manager: Accept Accept Accept with Changes: Not Accepted  Contracting Officer: Approve: Disapprove:  Instructions for Kennedy Space Center Lift Plan for Construction Contractors  1. Name of contractor performing the lift. Include name of person preparing this lift plan. 2. Date lift plan was prepared. 3. Project name and actual location of lift. 4. Describe the load and any special considerations. 5. Self-explanatory. 6. Brief description of piclup and placement of load. Attach diagrams as necessary. 7. Describe the load and any special considerations (e.g., dry, solid, filled with liquid, empty, stable, unstable, etc.). 8. Is the load's center of gravity known? If so where is it documented? Attach diagram. (On Lift Plan Worksheet) 9. Document the source of load weight (e.g., drynings, calculations, bill of lading, etc.). 10. 18. Self-explanatory. (On Lift Plan Worksheet) 11. List all additional eductions and weights 12. Add Block 10 through Block 19. (On Lift Plan Worksheet) 12. Describe boom configuration. Refer to manufacturer's terminology. 12. 27. Self explanatory (On Lift Plan Worksheet) 12. Self-explanatory (On Lift Plan Worksheet) 12. Self-explanatory (On Lift Plan Worksheet) 13. Check to indicate jib / lify erected, stowed, or stored off the crane. 14. If the Jib is used, enter the length of the boom in feet and the angle in degrees. (On Lift Plan Worksheet) 13. List the Jib capacity from the Fly from chart. 14. The weight of the ligh if it is installed on the boom in feet and the angle in degrees. (On Lift Plan Worksheet) 15. Describe own depth of the boom in feet and the angle in degrees. (On Lift Plan Worksheet) 16. Describe site, soil, stability conditions and any underground hazards or concerns. 17. Describe site, soil, stability conditions and any underground hazards or concerns. 18. Describe orangers estail and required matting if applicable. (On Lift Plan Worksheet) 19. Describe planned crane working quad				
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<ul> <li>49. List Spreader beam / other rigging used. State type, size, and capacity.</li> <li>50. Self explanatory.</li> <li>51. Self explanatory. (On Lift Plan Worksheet)</li> <li>52. The total weight of all rigging that will be used.</li> </ul>	5. Self-explanatory. 6. Brief description of pickup and placeme 7. Describe the load and any special cons 8. Is the load's center of gravity known? I 9. Document the source of load weight (e 10 18. Self-explanatory. (On Lift Plan Works 19. List all additional deductions and weight 20. Add Block 10 through Block 19. (On L 21. Describe boom configuration. Refer to 22 27. Self explanatory. (On Lift Plan Works 28. Crane's rated capacity at minimum boo 29. Copy Gross Load from Block #20. 30. Block #29 divided by Block #28. 31. Check to indicate jib / fly erected, stowe 16 the Jib is used, enter the length of the 33. List the Jib capacity from the Fly from 6 34. The weight of the jib if it is installed on 35. Describe site, soil, stability conditions a 36. Describe considerations for buildings, s 38. Describe considerations for buildings, s 39. Describe considerations for buildings, s 39. Describe any electrical hazards or conduction 29. Describe sings to be used. 10. In the planned configuration, list the mathematical planation of the length of the sling to be used. 11. The weight of the sling to be used. 12. The type of hitch to be used and its slin 14. Describe shackles to be used, number 14. The maximum rated capacity each sha	ent of load. Attach of iderations (e.g., dry f so where is it docug, drawings, calcul heet) ts.  Ift Plan Worksheet manufacturer's term heet) mangle / maximum angle / maximum rated capac g configuration angle / drawing / maximum rated capac g configuration angle / maximum rated capac and size.	, solid, filled with liquid, empty, stable, unstable, etc.). mented? Attach diagram. (On Lift Plan Worksheet) ations, bill of lading, etc.).  ninology.  radius. Figure worst case between pick and place.  crane. ne angle in degrees. (On Lift Plan Worksheet) being used during the lift. (On Lift Plan Worksheet) d hazards or concerns.  (On Lift Plan Worksheet) nent which will be under the load during the lift. g restrictions. nity to the crane. and room, use of taglines, reduced wind limitations, traffic control, etc. ity the sling can lift in lbs. (On Lift Plan Worksheet)	
53 63. Self explanatory.	49. List Spreader beam / other rigging user 50. Self explanatory. 51. Self explanatory. (On Lift Plan Works 52. The total weight of all rigging that will b	sheet)	and capacity.	



	Load Weight Field Verification						
Lift	Equipment Item	Weight	Crane Operator's Verification (Name & Initials)				
1							
		<u> </u>					
	7.134						
	Total Weight:  Maximum Radius:						
2							
	Total Weight: Maximum Radius:						
3							
		and the state of t					
	Total Weight: Maximum Radius:						
4			•				
	Total Weight: Maximum Radius:						
5	HIDAITHII TCCCCC.						
	Total Weight:  Maximum Radius:						
I	Maximum Radius:		i				